Signature

SCHEDULE E (FEC Form 3X)				
Γŧ	EMIZED INDEPENDENT EXPENDITURES		PAGE 6 OF 6 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				
	Loudoun County Democratic Committee C C00406447			
_ Cł	heck if 24-hour report 48-hour report New report	t Amends report	t filed on	
_	Full Name of Payee		Date of Public Distribution/Dissemination	
	Jayashree Sreenivasan		Man / Dad / Yayayay	
	Mailing Address 20765 Bank Way		Amount	
	City State Zip	ip Code	178.00	
	1 .	20165	Transaction ID : SE.5950 Date of Disbursement or Obligation	
	Purpose of Expenditure Chk 1183: Absentee Ballot Printing	Category/ Type 004	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Name of Federal Candidate	X Support	Office Sought:	
	John William Foust	Oppose	President Senate State:	
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary	
	Full Name of Payee Valerie Suzdak		Date of Public Distribution/Dissemination	
	Mailing Address PO Box 544		Amount	
	City State Zi	Zip Code	327.54	
	Leesburg VA 20	20178	Transaction ID : SE.5949 Date of Disbursement or Obligation	
	Purpose of Expenditure chk 1184: Spanish Literature	Category/ Type 004	11 12 / 2014	
	Name of Federal Candidate	X Support	Office Sought: X House District: 10	
	John William Foust	Oppose	President Senate State: VA	
_	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014 Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				
	(b) SUBTOTAL of Unitemized Independent Expenditures		•	
	(c) TOTAL Independent Expenditures		505.54	
	Under penalty of perjury I certify that the independent expenditures repuish, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.			
	Kannan Srinivasan		M M / D D / V V V	

[Electronically Filed]

12

Date

02

2014